



CEDARS PRIMARY SCHOOL – NURSERY CLASS

Application Form

Full Name of Child Male/Female

Date of Birth

Please give names of any siblings who attend Cedars Primary School

.....

PARENTS **Mother Mrs/Miss/Ms**

Father

Address

.....

..... **Postcode**

Email address

Telephone No. Home

Mobile

Please indicate below how many hours you require:

15 hours per week (Universal entitlement) 30 hours per week (Extended entitlement)

Please indicate below which sessions you require:

Session	Monday	Tuesday	Wednesday	Thursday	Friday
Morning (9am – 12pm)					
Afternoon (12pm – 3pm)					
Full Day (9am – 3pm)					

Signed **Date**

You will be contacted a term before your child is due to start Cedars Primary School's Nursery.

IMPORTANT: Please notify the school if you change your address or telephone number. It is our only means of contacting you in the future.

For office use:

Due to start Nursery Date received